

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

11 CV. 3024

Doroteo Polanco

(In the space above enter the full name(s) of the plaintiff(s).)

## COMPLAINT

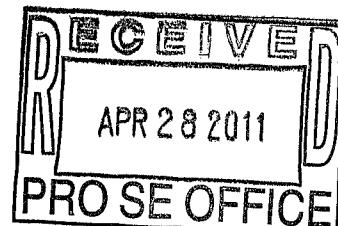
-against-

Tiano's Construction Corp., Mitrani Plasterers Co. Inc., Tiano's Construction Mitrani Cescore General Partnership, GB 2-  
Alasia Contracting Corp, Pkthgoras -  
General Contracting Corp, Safeco  
Insurance Company of North America,  
Lumbermens Mutual Casualty Company,  
St. Paul Mercury Insurance Company and  
Lloyd Ambinder (Former Attorney for  
the Plaintiff) SEE ATTACHED

Jury Trial:  Yes  No  
(check one)

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(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)



## I. Parties in this complaint:

A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name Doroteo Polanco  
 Street Address 1939 Grand Concourse Apt 1K  
 County, City Bronx, Bronx  
 State & Zip Code New York 10453  
 Telephone Number (646) 387-1915

B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendants

1. TIANO'S CONSTRUCTION, CORP.,
2. MITRANI PLASTERERS CO. INC,
3. TIANO'S CONSTRUCTION MITRANI CESARE GENERAL PARTNERSHIP,  
LOCATED AT 620 MOTAUK HWY, SHIRLEY, NY 11967
4. GBE ALASIA CONTRACTING CORP,
5. PYTHAGORAS GENERAL CONTRACTING CORP,
6. SAFECO INSURANCE COMPANY OF NORTH AMERICA,
7. LUMBERMENS MUTUAL CASUALTY COMPANY,
8. ST. PAUL MERCURY INSURANCE COMPANY,
9. LLOYD AMBINDER (former attorney for the plaintiffs)  
ADDRESSED AT 111 BROADWAY - SUITE 1403, NEW YORK, NY 10006

CONTINUATION SHEET

Plaintiff 1 Name Jose Delio Munoz

Street Address 1032 Ogden Avenue Apt 3

County, City Bronx, Bronx

State & Zip Code New York 10452

Telephone Number (718) 590-5405

Plaintiff 2 Name Andres Gonzales

Street Address 10 Richmond Plaza Apt 9G

County, City Bronx, Bronx

State & Zip Code NY 10453

Telephone Number (718) 590-5405

Plaintiff 3 Name Doroteo Polanco

Street Address 1939 Grand Concourse Apt 1K

County, City Bronx, Bronx

State & Zip Code NY 10453

Telephone Number (646) 387-1915

Plaintiff 4 Name Danilo Villa

Street Address P.O. Box 512

County, City Bronx, Bronx

State & Zip Code NY 10455

Street Address 760 Hewitt PL 2FLR

County, City Bronx, Bronx

State & Zip Code NY 10455

Telephone Number (718) 781-5052

Defendant No. 1

Name Lloyd Ambinder  
 Street Address \_\_\_\_\_  
 County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_  
 Telephone Number \_\_\_\_\_

Defendant No. 2

Name Pythagoras General Contracting Corp.  
 Street Address 8-67 ASTORIA BLVD  
 County, City LONG ISLAND CITY - N.Y.  
 State & Zip Code 11102  
 Telephone Number \_\_\_\_\_

Defendant No. 3

Name Tiano's Construction Corp. Mitrani Plasterers Co. Inc  
 Street Address MITRANI COSARE GEPTR  
 County, City 620 MONTAUK - HWY. SHIRLEY  
 State & Zip Code NY 11967  
 Telephone Number \_\_\_\_\_

Defendant No. 4

Name Lumbermens Mutual Casualty Company  
 Street Address 26 COLUMBIA TURNPIKE - NORTHE  
 County, City ENTRANCE FLORHAM - PARK  
 State & Zip Code NEW JERSEY 07932  
 Telephone Number \_\_\_\_\_

## II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (check all that apply)

Federal Questions  Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship \_\_\_\_\_

Defendant(s) state(s) of citizenship \_\_\_\_\_

\_\_\_\_\_

**III. Statement of Claim:**

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? Various locations  
in New York

B. What date and approximate time did the events giving rise to your claim(s) occur? \_\_\_\_\_

C. Facts: I worked many years for the companies  
before mentioned. I worked 12 hrs daily but only  
got paid for seven. I was never paid for  
vacations or received any labor benefits or  
insurance. I'm also filing a lawsuit against  
my previous attorney Lloyd Ambinder, Esq for abandoning  
the case and leaving me without representation.

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

**IV. Injuries:**

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. None

**V. Relief:**

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation. All I ask is to be compensated for all the hours I worked and was not Paid For I was upset at the Judge's Dismissal of the case without hearing the witness's testimony nor letting the Jury make their decision - I hope Justice can reign this time.

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I declare under penalty of perjury that the foregoing is true and correct.

Signed this 26<sup>th</sup> day of April, 2011.

Signature of Plaintiff

RODOLFO ALVAREZ

Mailing Address

1939 Grand Concourse Apt 1K  
Bronx, NY 10453

Telephone Number

(646) 387-1915

Fax Number (if you have one)

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

**For Prisoners:**

I declare under penalty of perjury that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, I am delivering this complaint to prison authorities to be mailed to the *Pro Se Office* of the United States District Court for the Southern District of New York.

Signature of Plaintiff: \_\_\_\_\_

Inmate Number: \_\_\_\_\_

CMD: AP028	NWYK - Case Inquiry	Trial appearances
603101/2001 2010L-00565	ARAUJO, TEOFIL OTHER COMMERCIAL BRAUN, RICHARD	TIANO'S CONSTRUCTION GENERAL CASES DISPOSED
		POST-NOTE
LAST - 04/01/2011	23TR BR DISM	IAS TRIAL READY 23 BRAUN, RICHARD DISMISSED
STRIAL COMMENT1: DEFNS MOTNS TO DISM	COMMENT2: <u>GRANTED DURING TRIAL</u>	
030 - 03/30/2011	23TR BR OT	IAS TRIAL READY 23 BRAUN, RICHARD ON TRIAL
STRIAL COMMENT1: 09.30AM	COMMENT2: TRIAL DAY THREE	
029 - 03/29/2011	23TR BR OT	IAS TRIAL READY 23 BRAUN, RICHARD ON TRIAL
STRIAL COMMENT1: 2.15PM	COMMENT2: TRIAL DAY TWO	